FORM D

ସ୍ଥାନ୍ତି Mail Processing Section UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

AUG 1 1 2006
Washington, DC

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
ORM LIMITED OFFERING EXEMPT

OMB APPROVAL

OMB Number: 3235-0076

Expires:
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105 SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEM	PTION LIPE RECEIVED
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Limited Partnership Interests	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	08057765
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Edgewood Partners, L.P. Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
10 Mechanic St., Ste. 200, Red Bank, NJ 07701	(732) 933-8444
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Investments in securities	
Type of Business Organization corporation business trust limited partnership, already formed limited partnership, to be formed	please specify): PROCESSED
Month Year Actual or Estimated Date of Incorporation or Organization: 04 96 Actual Estimated	Mated AUG 1 4 2008
Actual or Estimated Date of Incorporation or Organization: [O]4 [9]6 [Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	
CN for Canada; FN for other foreign jurisdiction)	NIU THOMSON REUTERS
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given which it is due, on the date it was mailed by United States registered or certified mail to that address.	3. A notice is deemed filed with the U.S. Securities below or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	0549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

– ATTENTION –

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC IDE	NTIFICATION DATA		
2. Enter the information re	quested for the fol	lowing:			
Each promoter of the second control of	he issuer, if the iss	uer has been organized w	ithin the past five years;		
 Each beneficial own 	ner having the pow	er to vote or dispose, or dir	ect the vote or disposition (of, 10% or more of	a class of equity securities of the issuer
 Each executive offi 	cer and director of	corporate issuers and of	corporate general and man	aging partners of	partnership issuers; and
		f partnership issuers.			
					T
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, is Sunnymeath Asset Mana					
Business or Residence Address 10 Mechanic St., Ste. 200	,		de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
James P. O'Mealia					
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
10 Mechanic St., Ste. 200	•				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)	******	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)	-	,
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)		<u> </u>		
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)	· · · · ·	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	· · · · · · · · · · · · · · · · · · ·			
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)		· · · · · · · · · · · · · · · · · · ·		
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)	<u></u>	
	(Use bla	unk sheet, or copy and use	additional copies of this s	sheet, as necessary	·)

					B. 19	iformati	ON ABOU	r offeri	VG.				
1.	Has the	issuer sold	, or does th	e issuer in	tend to sel	l. to non-ac	credited in	nvestors in	this offeri	ng?		Yes	No ⊠
••			,			Appendix,						_	_
2.	What is	the minim	um investm	ent that w	ill be acce	pted from a	ny individ	ual?				\$_4,00	00.00
3.	3. Does the offering permit joint ownership of a single unit?									,,,,,,	Yes	No	
4.	Enter th	e informat	ion request	ed for eacl	h person w	ho has bee	n or will b	e paid or g	given, direc	ctly or indi	rectly, any	لبتها	<u></u>
	If a pers	on to be lis s, list the na	ilar remuner ted is an ass me of the br you may se	ociated per roker or de	rson or age aler. If mo	nt of a brok re than five	er or deale: : (5) person	r registered is to be liste	with the S ed are asso	EC and/or	with a state		
Ful	l Name (Last name	first, if indi	vidual)									
Bu	siness or	Residence	Address (N	umber and	Street, Ci	ty, State, Z	ip Code)			·			
								. <u> </u>					
Na	me of Ass	sociated Br	oker or Dea	ller									
Sta			Listed Has										
	(Check	"All States	" or check	individual	States)		***************************************	••••••				All	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID]
	[IL] MT]	[NE]	IA NV	KS NH]	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WŸ	PR
Fu	II Name (Last name	first, if indi	vidual)	-								
Bu	siness or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)				<u> </u>		
Na	me of As	sociated Br	oker or Dea	aler	<u> </u>								
_													
Sta			Listed Has										l States
	(Спеск	"All States	or check									— ···	1 States
	AL IL	AK IN	AZ IA	AR KS	CA KY	CO LA	CT ME	DE MD	DC MA	FL MI	GA MN	HI MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Fu	ll Name (Last name	first, if indi	vidual)			-						
Bu	siness or	Residence	Address ()	Number an	d Street, C	city. State.	Zip Code)						
Na	me of As	sociated Bi	oker or De	aler									
Sta	ites in Wl	nich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers		•		<u>. </u>		
	(Check	"All State:	s" or check	individual	States)			•••••	•••••			□ Ai	1 States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	Œ
	IL MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE; NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check			
	this box and indicate in the columns below the amounts of the securities offered for exchange and			
	already exchanged.	Aggregate		Amount Already
	Type of Security	Offering Price	e	Sold
	Debt	\$ 0.00		\$_0.00
	Equity	\$ 0.00		\$ 0.00
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)	0.00		0.00 \$
	Partnership Interests	s 611,902.08	3	\$ 611,902.08
	Other (Specify)			\$ 0.00
	Total	s 611,902.0	8	s 611,902.08
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this			
۷.	offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their			
	purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate
		Number		Dollar Amount
		Investors		of Purchases § 611,902.08
	Accredited Investors			\$ 0.00
	Non-accredited Investors			
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	3		
		Type of		Dollar Amount
	Type of Offering	Security		Sold
	Rule 505			s
	Regulation A			\$
	Rule 504	_		s
	Total			\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	-		
	Transfer Agent's Fees	••••••		\$
	Printing and Engraving Costs			s
	Legal Fees			\$
	Accounting Fees			\$
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)	•••••		S
	Other Expenses (identify)			\$
	Total			\$_0.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$
5. Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
	Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees	s	s
Purchase of real estate	□ \$	
Purchase, rental or leasing and installation of machinery and equipment	s	
Construction or leasing of plant buildings and facilities	s	
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	□ \$	ПS
Repayment of indebtedness		
Working capital		
Other (specify): Investments in securities	 \$	\$ 611,902.08
	s	
Column Totals	<u>\$ 0.00</u>	\$_611,902.08
Total Payments Listed (column totals added)	_	11,902.08
D. FEDERAL/SIGNATURE		
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Committee information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of	ssion, upon writt	ule 505, the following en request of its staff
Issuer (Print or Type) Signature	Date	
Edgewood Partners, L.P.	7/28/	08
Name of Signer (Print or Type) Title of Signer (Print or Type)		
James P. O'Mealia President, Sunnymeath Asset Management,	Inc., General Pa	irtner .

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠
	Control Column 5 for state and and		

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Sign atus e	Date
Edgewood Partners, L.P.	(a wound	- 7/22/08
Name (Print or Type)	Title (Print or Type)	
James P. O'Mealia	President, Sunnymeath Asset Ma	anagement, Inc., General Partner

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1 2 3 4 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Amount Investors Amount Yes N_0 AL X × AKX X AZX X AR X X $\mathsf{C}\mathsf{A}$ X X CO X X CTX X X DE X DC X X × FL X X $\mathsf{G}\mathsf{A}$ X Ш X × ID × X ΙL × X IN × X ΙA X X KS X × ΚY X X LA X X ME X X MD × × MA X X 2 x ΜI Partnership \$187,500.0 .0 X \$0.00 Interests MN X X MS X X

APPENDIX

APPENDIX 5 2 3 4 1 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate explanation of Type of investor and offering price to non-accredited waiver granted) amount purchased in State investors in State offered in state (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) Number of Number of Non-Accredited Accredited Yes No Yes No Investors Amount Investors Amount State X MO × X MT × NE X X X NV× × NH × 8 × \$0.00 NJ 0 × Partnership \$299,402.0 Interests NM X × Partnership \$125,000.00 0 \$0.00 × 1 X NY Interests × NC X X ND × x X OH OK X × X X OR X PΑ X RI × × SCX SD X × X TN X × TX X ŲT X x VT X × X VA x X WA × x wv X X WI ×

			1	1						
1		2	3 Type of security	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
	to non-a	d to sell accredited rs in State 3-Item 1)	and aggregate offering price offered in state (Part C-Item 1)							
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY		×							×	
PR		×			-				×	

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